

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS	THIS	AN	AMENDMENT?		Yes	DØ	No
----	------	----	------------	--	-----	----	----

	COMMITTEE INFORMATION		OLD BY YOUR	
Full Name of Committee (as on Statement of Organ		name	Control of the last of the las	
BELDEN FOR COUNT			26 E	
2. Acronym or Abbreviated Name (if any)	7 50-15-15-1	_	mittee Telephone No	umber
NIA			2) 843-	
4. Mailing Address (address where all campaign finan	ice correspondence is received)		s is a new address	7.07.7
35 WILSON DR.				
5. City, State, ZIP Code CARMEL, IN 46	032	RL	Affiliation (if application)	CAN
CANDIDAT	E INFORMATION (For Candidate's C	ommitte	es Only)	
7. Full Name of Candidate (include any nickname)		8. Party	Affiliation or If Inde	
JAMES JULIUS B	ELAEN	RA	PUBLI	CAN
9. Office Sought (include district number, if any. Not i			inty of Residence	- /
COUNTY CONNEZL		H	AMILT.	
TYPE	OF REPORT		CONV	ENTION CANDIDATES ONLY
11. Check one:	-	*	Check	
Pre-Primary Pre-Election Annual Nomination				e-Convention
Final/Disbands Committee (fines 18, 19, and 20 must be "0")	Outgoing Treasurer (within 10 days amend Statement of	Corganization) L Po	ost-Convention
12. Reporting Period: From: 4/-/2 - 08	Through: 10-10-08		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of			5. 424.	9/
14. Cash on hand and investments January 1, curren				844.96
CONTRIBUTIONS				017.78
(Note: these amounts include in-kind contributions an	d loans, as well as cash contributions.)			
15a. Hemized (use Schedule A)			1,250,	,00 6,350.00
15b, Uniternized			300	,00 700.00
15c. Add lines 15a and 15b in both columns	SUBT	OTAL	1.4500	
18. Add lines 13 and 15c in Column A and lines 14 as	nd 15c in Column B	TOTAL	6.974.	
EXPEND	ITURES			
(Note: These amounts include in-kind expenditures a	nd loan repayments.)			
17a, Itemized (use Schedule B) (Public Question: use	Schedule C)		5,984.	00 5,964.00
17b. Uniterrized	·.		320	
17c. Add lines 17a and 17b in both columns	SUB	TOTAL		00 6.224.00
18. Cash on hand and investments at close of this reporting	period (subtract 17c from 16 in both columns)	TOTAL		96 1,670,96
19. Debts OWED BY the committee (use Schedule D			-6-	110 1110 10 10
20. Debts OWED TO the committee (use Schedule E			-6-	
	CERTIFICATION			FOR OFFICE USE ONLY
Signature on File	IE BEST OF MY KNOWLEDGE AND BELIEF IT IS T		late	N8310
	TREASURER	1,	10-12-0	PECCY SEAVER -
	7.7.0	10	Date	08 OC 13 BW 1:2
She a foundated count committee Chee D falous 70 2 4 4	copied for sale or used for any commercial purpose.	(IC 3-9-4-5)	A person who knowing	W CITI-
files a fraudulent report commits a Class D felony. (IC 3-14-1- Campaign Finance Law commits a Class B misdemeanor, (IC 3-				



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) by State Board of Accounts 1999

Approved

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE	NUMB	ER	
Page _	2	_ of _	2	

RECIPIENT'S NAME AND MAILING ADDRESS) (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
DEANA LYNCH 1284 COPPOR- GT. NOBLESUICLE IN 4606	SECRETARY LIETTER FOR CAMPAZGE	Purpose:	150.00	150-00	5-9-08
SHERRY RUSHFORTH NOBLESVELLE, ING	SIGN MGMT	Payment of Debt Returned Contribution Other Purpose:	300.00	300,00	5-9-03
CARMEL AMERICAN GARMEL AMERICAN GARMEN ST. CARMEN IN 46032	DONATION	Payment of Debt Returned Contribution Other Purpose:	250.00	250.∞	6-9-08
DANUS DEUTCOPMEN NOBLESVELCE, IN	T BONATION	Payment of Debt Returned Contribution Other Purpose:	200.00	780.00	7-14-08
Code Code	NowATEM	Payment of Debt Returned Contribution Other Purpose:	1000	100.0	5-76-0
Code	·	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	E OF SCHEDULE B	\$ 900		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the		\$5,904,0		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER				
Page	1 of 6	_		

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	RECEIVED
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
" JOHN P. ScHULER	Direct			2-7-08
13595 LANDSER PL.	In-Kind (describe)		500,00	
CARMELITO 46033	Other Receipts:			
-,,,-	☐ Interest ☐ Loan ☐ Misc. (specify)	7		TIM
Contributor's Occupation (If required) CONSULTANT			10	BELDE
Contributor's Occupation (a required)	Contributions:	· · · · · · · · · · · · · · · · · · ·		
LARRY DAWSON	Direct In-Kind (describe)		Ħ	2.14.08
117/ NI CLAREOGE WAY			250.00	
CARMELITA 46032	Other Receipts:			-
CARMINE/EN 12	Misc. (specify)			BELDEN
Contributor's Occupation (if required) LUG INIEER				TELKED
1	Contributions:			
DAVE + LINDA RECHTER	In-Kind (describe)		7	2-18-08
6037 HOLLYTHORN PLACE	Other President	* * *	332.00	
CARMEL, IN 460 33	Other Receipts:	75		TERE
Colonte	Misc. (specify)	80		BELDEN
Contributor's Occupation (if required) CowsuLTANT	0.13.6			1012 10/20
PHILLEP + KATHLE! N	Contributions:			249.08
KUNTZ	In-Kind (describe)		250.00	221.00
13455 MILLENDR	Other Receipts:		2 32.20	JEM
FISHBRS, IN 46037	☐ Interest ☐ Loan ☐ Misc. (specify)			
Contributor's Occupation (if required) ENGTN ELA	I most (specify)			BIELARES
E .	Contributions:			2-26.08
JOHN F. CHLP	In-Kind (describe)	100.00	150.00	2 100
970 LOGAN 3"			1	
970 LOGAN ST. NOBLESVILLE, IN 46060	Other Receipts:			TEM
, , , , ,	Misc. (specify)			BELDE
Contributor's Occupation (if required) ATTORNEY				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1,500.00		
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE)	A ON THE LAST PAGE ONLY M 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebales, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Page_	2	of	6		

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	RECEIVED
(street, number, city, state, ZIP code)	Contributions:	PERIOD	YEAR-TO-DATE	RECEIVED BY
DANTEL + RHONDA WOO	Direct		500,00	3-6-08
7433 WEST FOX WENTR.	In-Kind (describe)		300,00	
NEW PALESTINE, IN 46163	Other Receipts:			
10200 14-21 252125 40105	Interest Loan			TEM
6.11.7.2584	☐ Misc. (specify)	-		BELDER
Contributor's Occupation (Il required) ENGINER	Contributions:			
STEPHEN + BEAUE CHREGIKAN	Direct			3-7-08
6562 HUNTERS REBGE SO.	☐ In-Kind (describe)		500,00	
	Other Receipts: ;			
22049VELLE, IN 46077	Interest Loan			
	Misc. (specify)			JEM
Contributor's Occupation (if required)	Contributions:			BRUFER
MARCEN A. KNOWLES JR.	Direct			
7260 SHARELAND STATON	n-Kind (describe)			3.208
IN8015, IN 46256	Other Receipts:		580.00	
	Interest Loan			Ten
15 26 431 3 0	Misc. (specify)	ās .		BRIDER
Contributor's Occupation (if required) TENG TAILER	Contributions:			
JOSEPH & ARBRA WARE	Direct			3-7-08
11414 KAYAK CT.	In-Kind (describe)		200,00	
IN 8,064, IN 46236	Other Receipts:			
	Interest Loan			TEM
1 acut Part	Misc. (specify)			BELLEN
Contributor's Occupation (if required) CONSULATOR	Contributions;			
PDANTIEL + PRECY STEVERS	Direct	- 100	250,00	3-18-08
212 CREENWOOD DR	In-Kind (describe)	1		
312 CREENWOOD DR WESTFIELD, IN 46074	Other Receipts:			
100	Interest Loan			BUSTO
2 101 -	Misc. (specify)			BUSEN
Contributor's Occupation (if required) CONSULTANT				
TOTAL OF ALL PAGES OF SCHEDULE	THIS PAGE OF SCHEDULE A	\$ 1,950,00		
	If 15a of the Summary Sheet)	\$		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebales, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FIL	E NUMB	ER	
Page	3	of	6	

				
CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
EERST SOURCE CAPITALL 14300 CLAY TERRALEBUR SUFT 200 CARMEL, IN 46032	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)		250.00	3-10-08 TEM BELDEN
MEYER NAJEM INC. 13099 PARKSTER DRIVE	Contributions: Direct In-Kind (describe)	190.00	1500	3-11-08
FISHERY, IN 46038	Other Receipts: Interest Loan Misc. (specify)	1		JER BELDEN
*AMERICAN TEMBER BANGE & CHLVERTS, TOK. 14279 C.B. MACDONALDWAY	Contributions: Direct In-Kind (describe)	2 2.00	250,00	3-26-68
VILKIBURG, MI 19097	Other Receipts: Interest Loan Misc. (specify)			TIM BEWEN
TERRY M. BAKER 8901 OTES AVE.	Contributions: Direct In-Kind (describe)	250.00	250.00	4.25.08
THORANHPOGES, FN 46216	Other Receipts: Interest Loan Misc. (specify)	230.00		BELDER
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 900.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	•		



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Sq bno	Ihe sec	this page is			
Page _	4	_ of _ 6			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 /1	Contributions: Direct In-Kind (describe)		(des	
MI	Other Receipts: Interest Loan Misc. (specify)	d nailing address	ar year (\$200" tlee's account.	corum
Contributor's Occupation (if required)	tor's name in this soace,	uditinco a primida	5 DSM/V : (MALL)	IOSIMI.
2. Septemble contributions of at least septemble aggregate contribute as optional. Examples:	Contributions: Direct In-Kind (describe)	the accupation of index year. Occu		
aprophate box. For in-lond contributions one burner stickers or mailings etc.).	Other Receipts: Interest Loan Misc. (specify)	Inghileer", NOT "d Floh OR OTHER "oduct or service	ey', 'Sanker', 'S OF CONTRIBUTED SE the deneral of	BSYT
Contributor's Occupation (if required)	aldioxi			For 'm
The second of the second	Contributions: Direct In-Kind (describe)	THIS PERIOD: I	WIN A AMOUNT	tuoo o ni ni or o
	III-Kina (describe)			
aletive contributions, including invitord,	Other Receipts: Interest Loan Misc. (specify)	ATME YEAR-TO celp to colonidar y	MN B CUMUL rs-in, or other re	planerd
B is the same as the entry in Column	successive and American	soci i calendar ya	to notiar sami	idt nO
4.	Contributions: Direct In-Kind (describe)	ar the month, da e the committee stee, or mailed. F	RECEIVED: Enterprise del	STAG telebro b TOW
	Other Receipts: Interest Loan Misc. (specify)	M Japaces a sed on settimate an	led in the committee open very	RECE 25)
Contributor's Occupation (if required)				
TAL OF ALL PAGES ON SCHEDULE 2	Contributions: Direct In-Kind (describe)	e or Screens chedule, the figu	e page of this 5	naus o tho .A.
	Other Receipts: Interest Loan Misc. (specify)	S ON SCHEDUR t of all pages on	OF ALL PAGE	ONLY) Shuet
Contributor's Occupation (if required)		-		
SUBTOTAL 1	THIS PAGE OF SCHEDULE A	\$ 6/		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 15a of the Summary Sheet)	\$		



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

FILE	NUMBER	
ages used for	gewill bridge	9.8
Page 5	_of6	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	12/1	Contributions: Direct In-Kind (describe)			
	A property of the second of th	Other Receipts: Interest Loan Misc. (specify)	talling address of transfers-in from toom that, or reg	n same and q Nanstorin. All Political action	beveces committee
2.	ive receipts over \$100 within a calendar sid misrest to a committee's account.	Contributions: Direct In-Kind (describe)	Miling advirage of Johnn (tee). This	it regular party	Enter the year (\$250
	imperative to list the full name of the ropriate box. For in-kind contributions	Interest Loan Misc. (specify)	ing a contribute N OIL OTHER	NT: When shield CONTRIBUTION	A TROPAN I luck thoo RO ERYT
	bumper stickens or medings, etc.). For	urden fauch as year signs,	no soviet to the	spord thaust at	d adriesp
3.		Contributions: Direct In-Kind (describe)	S PERIOD: Enti	HT THUCKA A	COLUMP!
		Other Receipts: Interest Loan Misc. (specify)	YEAR-TO-DAT	S CUMULATIVE	COLUMNA or oliver re-
	e same as the entry in Column A.		case idar year,	t report of each	mit era no
4.	received. For directs and money orders the committee's account, NOT the date if sceived when cash is deposited in the	In-Kind (describe)	e month, day, an tise deposited th cast contributed	EIVED: Enter to date the comme or meited. For	DATE RED indicate the was write
		Other Receipts:	then given or ma somities membe		REC SIVIE
		and the letter of the colors.	A BUUDBHOR R		SUBTOTA
5.	YES ON SCHEDULE A. YES HERE (ON THE LAST PAGE ONLY)	Contributions: Direct In-Kind (describe)	gure is the same	ALL PAGES OF	TOTAL OF
		Other Receipts: Interest Loan Misc. (specify)			20.00
	SUBTOTA	AL THIS PAGE OF SCHEDULE A	5 0		
	TOTAL OF ALL PAGES OF SCHEDUL	E A ON THE LAST PAGE ONLY	s		
	(Enter total on I'	TEM 15a of the Summary Sheet)	*		BEAR TREE



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, relunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE	NUMBE	R	
Page_	6	of	6	

CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B	DATE RECEIVED
FULL MAILING ADDRESS (street, number, city, state, ZIP code)	OR OTHER RECEIPT	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	RECEIVED BY
COMMETTE TO REELECT	Contributions:			
SHEREFF DOUG CARTER	In-Kind (describe)		1000,00	2-29-08
18100 Cum BERLAND RR	Other Receipts:			JEM
NOBLEGUELLE, IN 46060	Misc. (specify)			BIELSKED
2 - 11 T F. P. R	Contributions:			
2 STEVE HOLT FOR	Direct In-Kind (describe)			4-16-08
COMMISSIONER TREASUREM	In-Kina (describe)	LODDO	1,000.00	
606 HAMP SHIKE CT,	Other Receipts:	1000.2	1,00	JIM
CARMEL, IN 46632	Misc. (specify)			BREDER
3.	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
4	Contributions:			
	Direct In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
5.	Contributions:	-		1
	☐ In-Kind (describe)			
	Other Receipts:			
	Misc. (specify)			
SURTOTAL	THIS PAGE OF SCHEDULE A	stand	0	
TOTAL OF ALL PAGES OF SCHEDULE		:63500°		
	M 15a of the Summary Sheet)	6.350	ř	



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE NUMBER
Page	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
JAMES J. BELDER 35 WELSON DR CARMEL, IN 46032	RETTRED COUPLE	Purpose:	54 00 A C	400,00	1-08-08
COUNTY REPUBLICAND PARTY 7246 FES HARY CROSSER FISHERS, TO 460 38	PARTY OF HAULU	Wat David	65,00	315,∞	6-10-08
CARMEL REPUBLICAND PARTY CARMEL TW 46032	REPUBLICAN :	Payment of Debt Returned Contribution Other Purpose:	100,00	250,00	10-6:08
SPECTRUM SIGNCO. 16095 PROSPERITY DR SUETE 500 NOBLESVILLE, INY		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	2, 889."	7.1889.	4-21-08
Code C WESTFIELD ATU BOOSTONS WESTFIELD HIS WESTFIELD HIS	BoosTer	Payment of Debt Returned Contribution Other Purpose:	150.00	150,00	5-6-08
	BOOSTER	Payment of Debt Returned Contribution Other Purpose:	50000	500.00	5-6-08
CODE O BELLEN BEV BELLEN 35 W ELSON DR. CARMEC, IN 46032	SECRETARY SERVICES	Payment of Debt Returned Contribution Other Purpose:	500,00	500,00	5-6.09
TOTAL OF ALL PA	SUBTOTAL THIS PAG AGES OF SCHEDULE B ON THE (Enter total on ITEM 17a of the	E LAST PAGE ONLY			



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) by State Board of Accounts 1999

Approved

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

	FILE I	NUMB	ER	
Page	2	_of	2	_

RECIPIENT'S NAME AND MAILING ADDRESS) (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
DIANA LYNCH 1284 COPPOR- 9T. NOBLESUICLE IN 4600	SECRETARY LIETTRA FOR CAMPAZGE	Payment of Debt Returned Contribution Other Purpose:	150.00	150-00	5-9-08
SHERRY RUSHFORTH NOBLESVELLE, JNG	SIGN MONT	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	300.00	300,00	5-9-08
CARMEL AMERICAN GAS W MAIN ST. CARMEN IN 46032	DONATION	Payment of Debt Returned Contribution Other Purpose:	250.00	250.∞	6-9-08
JANUS DEUT COPMEN NOBLESVELCE, IN	T BONA TOON	Profirect In-Kind Payment of Debt Returned Contribution Other Purpose:	200.00	780.00	7-14-08
Code		Progress In-Kind Payment of Debt Returned Contribution Other Purpose:		÷	
Code	•	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	-		
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG		\$ 900		
TOTAL OF ALL PA	GES OF SCHEDULE B ON THE (Enter total on ITEM 17a of to		\$5,904,0		



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

	FILE NUMBER
Page	

	PUB	LIC QUESTION INFORMA	TION		
Enter Text of Public Question	n 98				10
Type of Question: Statewide Position: Supported Oppose					
RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF EXPENDITURE	PURPOSE OF EXPENDITURE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
.1/1	Direct				
NIA	☐ In-Kind		÷		
	Direct	:			
	☐ In-Kind				
•	Direct		6.		
	☐ In-Kind				-
	☐ Direct		es es es		7
	☐ In-Kind	4			
	☐ Direct	-			1
	☐ In-Kind	(*			
	☐ Direct				
The state of the s	☐ In-Kind				
	SUBTOTAL	THIS PAGE OF SCHEDULE C	\$		
		C ON THE LAST PAGE ONLY M 17a of the Summary Sheet)	\$		



(CFA-4 SCHEDULE D)
DEBTS OWED BY THIS COMMITTEE

State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Page	/	of	/		

			Page _	(-0'-	/
CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
ot. For a credit card account in	à bisquu ne priworla inevaupol	consol, or any other	s friso fiber (officement describe	nut
		to libera entito eman	miline, list the	nco eriz to erne:	Set
		or andorsers, V the s	MILLBOOKER	DRIBER'S OR	IMS
		the the name and add	oa a zódeb b	ea fibero sellini	noc
ENDER'S OCCUPATION:	of band, with the service to to at	rastrio-en Job op fuc	this column,	ai robnev das	tal
type for the loan. Interest page	in (gracipal), not the intarest of		s and hears in	olessistinu:	NLA
	enditures by the committee and the committee and must be re-	gxa as batagri ana ar	finance on angli s orthodox to a	loan and other	C E
ENDER'S OCCUPATION:	esch transacion.	Ancome and wine a	me and page	ommittee credi	307
	nigerns a short description of			1850 90 H9L	Al-
Inacquie	sound of committee credit care	se nego" (ajon yadas	mo g "nadi";	Injuria. Eusignal	Dir.
algranus assis batterns also as			ALD: Enter th		
	on and the committee gave a let be entered in this space.		rowed morey to was alread	and estimation in the not	rit i tsö
ENDER'S OCCUPATION:					
art do mente sa nodocenso et	ang charge pean, the date of			ka: selfirmmöd i v insmalafa fra i	rit 1
audibnocky na barobana ai sa audibnocky na barobana ai sa	t that has been repaid on the a lo			UBATIVE PAIL	7.77.57
ENDER'S OCCUPATION:	S. For committee credit ca	ported on Schedule		e committee e	Y.
nection in this column.	e amount of each vender tra	BURL DO HOUR BERICE D	et I van Heerte	ons of pard 195	STYLL
awed by the committee You					
	Sebt owed by the committee of the total sotstanding			continue to re- quished. For	
ENDER'S OCCUPATION:	petien in this column.				
	Asterbal for this page of Schedu	DULE D: Enter the	HOR BO SON	TOTAL THIS P	auz
	L PAGES ON SCHEDULE D	as the TDTAL OF	ine is the Lens	chedule the fig	
HE LAST PAGE ONLY) the total	T PAGE ONLY: Even ON T	CESKE MO G SOLA	ENDIE ROESE	NL OF ALL PA	
365	on ITEM 19 of the Susantary S	mugh authrovin detA.	O suberts2 rs	aagaq tis to Jni	
NDER'S OCCUPATION					
ENDER'S OCCUPATION					
THEN & SYMMET STATE		CURTOTAL	THIS DAGE OF	S S C U E D U E D	
				SCHEDULE D	\$
	TOTAL OF ALL I	PAGES OF SCHEDULE (Enter total on I)			\$



(CFA-4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE

State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

NSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in
completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount,
OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others

FILE NUMBER							
Page _	/		MIX				

BORROWER'S NAME & MAILING ADDRESS	CO-SIGNER;S NAME & MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
(street, number, city, state, ZIP code)	(street, number, city, state, ZIP code)	NATURE OF DEBT	MODITALES	YEAR-TO-DATE	PERIOD
18-	bohea pahoda	ren a loan within th	miltee has gr	eporting com	whom the n
NONE	the full name and mailing by the reporting committee	ADORCES Und S, If the loan made	BMLIAM GK Berotin o 10 ,	K'S NAME A	CO-SIGNIE Co-signerit. Solify
aned to another person	orling committee initially la	per ant the reg	aler the pane	AMOUNT: 6	ORIGINAL.
manitee This required a		ed to she committee	er the nature spe of cebt o	F DEBT: En	NATURE C
ert vd obein saw tibero i	and year that initial loan, o	ter the month, day	E :CORRUS	GATION IN	JBO STAC
to some selection of the	nount of principal repaid to	En lator ero tetal en			TALFUNUS
nt of interest received for	mittee on a loan, the amou direpeded on Schedule A.				
	standing balance of the di alance of the delx in be or	RIOD: Enter the our of the outstanding I	CE THIS PE	ING BALAN	DAATETUC committee
hedule E. If there is only SCHEDULE E.	stricted for this page of Sc OTAL OF ALL PAGES OF	ULE E: Enter the a the Time at the Time Time Time Time Time Time Time Tim		THIS PAGE	LATOTEUSTAL page of
- YOM THE LAST EAGE	I no enugit sint rathe cal	HI S ED ON THE		ALE PAGES	OTAL OF
VIEHINDS SIN 10 VA 11-3	TI LO EIDGH SHE ISHE CE	1 - 1 SIDDOL 100 110	DOSIN NO W	1000	Jaarti
	t en				
		e di Arabana Arabana			
2000 CC 13	Би 1:51	SUBTOTA	L THIS PAGE OF	SCHEDULE E	\$ ^
	TOTAL OF A	LL PAGES OF SCHEDUL	E E ON THE LAS		\$